



Waterfield House Surgery -Patients Participation Group (PPG)

Quarterly Meeting Minutes

11 January 2023

Attendees	<p><i>Waterfield House Surgery - Patients Participation Group Members:</i></p> <p><i>Peter Gonsalves (Practice Manager, Waterfield House Surgery)</i></p> <p><i>Anne Nicholls (Secretary)</i></p> <p><i>Tony Nicholls</i></p> <p><i>Marie Janet Cook</i></p> <p><i>Wendy Ann Saunders</i></p> <p><i>Gaby Molloy</i></p> <p><i>Ann Willingale</i></p> <p><i>Trudy Donachie (Chair)</i></p> <p><i>Gill Cole</i></p> <p><i>Nigel Stratton</i></p> <p><i>Marie-France Mason</i></p> <p><i>John Cripps</i></p> <p><i>Hazel Daniell</i></p> <p><i>Apologies for absence received from David Hanes, Andrea Moore, David Moore, Angela Cartwright, Sue Giles, Karen Elmes, David Coleman, June Crowhurst, Andy Willingale, Melvyn Cole</i></p> <p><i>No apologies for absence received from other PPG members.</i></p>
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Agenda Item	Minutes, Q&A/Feedback and Actions	
Acronyms and Abbreviations	<p><i>CCG</i></p> <p><i>ICB</i></p> <p><i>JCVI</i></p> <p><i>LMC</i></p> <p><i>PCN</i></p> <p><i>PCT</i></p> <p><i>PPG</i></p> <p><i>PVN</i></p>	<p><i>Clinical Commissioning Groups</i></p> <p><i>Integrated Care Board (has replaced the CCG)</i></p> <p><i>Joint Committee on Vaccination and Immunisation</i></p> <p><i>LMC Local Medical Committee</i></p> <p><i>Primary Care Network</i></p> <p><i>Primary Care Trust</i></p> <p><i>Patients Participation Group</i></p> <p><i>Pembury Village News</i></p>
Agenda Items	<ul style="list-style-type: none"> • Welcome • Apologies • Matters arising • Chairs report • Update from the surgery • Fundraising • AGM • Date of next meeting • AOB 	
Minutes of previous meeting	<ul style="list-style-type: none"> • The minutes from September 2022 meeting have been agreed. 	
Actions from Last Meeting	<ul style="list-style-type: none"> • The actions from September 2022 meeting have been confirmed as complete. 	



<p>Feedback from PPG Chairs meeting (Trudy Donachie)</p>	<ul style="list-style-type: none"> • Since the last meeting I have continued to remain in contact with the surgery. Through this contact I was able to inform the residents of Pembury when Dr Jennifer Stainfield was employed and the introduction of E-Consult. This information has been well received and comments re the E-Consult system have been very positive. • I have remained in contact with other chairs in the PCN; all say their surgeries are finding the same issues as Waterfield House. At our last meeting with meet with Gill Martin who is the PCN operations manager. At this meeting she offered to invite one of the chairs to the board meeting to represent PPG's in TW. I am attending this meeting next week. This is a great opportunity for the PPG to be involved at PCN level and hopefully it will be a positive experience for all. • I have continued to attend the West Kent Chairs meetings the latest one being Tuesday this week. At this meeting Health Watch reported that they have been into some care homes in West Kent. Their full report will be available at the end of March. I will let you know when this is available. • I look forward to continue to work with the staff at Waterfield House to ensure the services we all receive are the best they can be. <p>Feedback – it may be useful to share appropriate PPG information on all the Pembury Facebook sites:</p> <ul style="list-style-type: none"> Pembury Matters (currently used) Pembury Actually Matters Pembury Life Matters
<p>Update from the Surgery (Peter Gonsalves)</p>	<ul style="list-style-type: none"> • Welcome Welcome to PPG members back to the surgery, it is good to see people face-to-face again after 3 years. • PPG Chairs Meetings Rationale and PCN Meetings The aim of these meetings is to try and approach common issues in a collaborative way: sharing resources and coming up with common solutions where possible. All with the aim of providing a better service to our patients and better use of resources available to us. • NHS Service Provision The demand for primary, secondary and tertiary NHS services has skyrocketed, but there is a need to address the delivery of these services as there are not enough clinicians etc. to cover this demand. It is therefore important that the surgeries in the PCN work together. • Waterfield House Staffing <ul style="list-style-type: none"> <i>General Practitioners</i> Dr Jennifer Stainfield joined our staff at the end of October. She works Monday, Wednesday and Fridays. Unfortunately we have been unable to find full time GPs. Q - How many GPs do we have in the practice? A - 4 (Dr Justice and Dr Minkah are full time, Dr Stainfield is part time and Dr O'Neill works on Tuesdays during term time only) <i>Clinical Practitioners</i> Nasreen Uddin is our Clinical Pharmacist working on Mondays, Tuesdays and Thursdays Feedback – Gaby would like to pass on her thanks and appreciation for the wonderful support that Nasreen has given. Amelia Green was the Physician Associate, a shared role within the PCN, but has resigned this post. Ross Smith is our Paramedic Practitioner and is now working full time in this role – Ross will cover some of Amelia's role.



Practice Nurses

Diana Taylor joined the practice nurse team in early January and will be available to take patient appointments from 16th January 2023.

Admin Team

There have been a couple more resignations from the admin team, and like all surgeries we are finding it harder to recruit and therefore this puts more of a strain on the team. Most admin staff work on a part time basis and this impacts on the training time, generally taking about 12 months for someone working part time to be fully trained and able to work independently.

- **Appointments**

Appointment requests with the GPs continue to outstrip the number of appointments the surgery can offer and often by 08:05am, i.e., only 5 minutes after the lines open, all telephone appointments have been taken up. It is acknowledged that the current appointment booking system has its shortfalls which lead to patient dissatisfaction and anger.

Q – How does the telephone system work- when minutes after it opens all appointments are taken?

A – The system puts people in a holding list on a first come-first served basis, there is not assessment on the urgency of the health issue.

Q – Could the telephone system let people know when all appointments are taken so they do not have to hang on the phone for ages?

A – Yes, and it does but only to people who have not yet joined the queue. Those currently in the queue are not notified.

Q – Does the current telephone system allow the admin staff to track how many times a patient may have tried to get an appointment?

A - No

To overcome this issue patients can use:

E-Consult

Feedback on the use of the e-Consult system has been very positive and it has been proven to be a useful triage tool to enable clinicians to assess patient issues and direct treatment accordingly. Though it is acknowledged that this system may also burden the clinicians who currently assess all forms.

Q – Could one of the nursing staff look at the E-Consult forms rather than the duty doctor?

A - Potentially, but this only moves the job into another area that is fully stretched. There is a potential to get the Paramedic Practitioner to help out with this function.

Q – Can the reception staff advise the patient to see the Pharmacist rather than the doctor?

A – Yes, but patients can still insist that they see a GP.

Q – Is the Pharmacy able to prescribe medication for a patient?

A – No. Pembury pharmacy does not have a pharmacist that is qualified to prescribe. They can only recommend over the counter, non- prescription medications.

The form is available from the surgery website:

<https://www.waterfieldhousepractice.nhs.uk/econsult>

Non-urgent appointments can be requested in advance using either the on-line booking system via Patient Access or by telephone (after the 08:00 am rush).



Where a GP has requested to see you again, e.g. within a few weeks or months the patient can get reception staff to book in the appointment straight away.

Q - Could e-mails be used to request non urgent appointments?

A – No. This would need additional admin staff to review the e-mails and then add data to patient records. On the other hand E-Consult requires the patient to completed pertinent information and also links direct to patient records.

Q – Are GPs still covering all the care homes and residential homes in the area?

A – Waterfield House covers the health needs for Seven Springs (formerly known as the Leonard Cheshire Care Home in Pembury Rd), Cornford House and Hazeldene. The surgery is contracted to provide two sessions a week to each of these homes, plus providing ad-hoc visits.

Q- What is the impact on the surgery for patients discharged into care homes from the hospital?

A – We no longer have this responsibility – it is now covered by the Lonsdale Surgery in Tunbridge Wells

Q – Do we know why the demand for appointments as grown so much?

A – The increase in infections such as Strep A, Covid and Flu as well as delays in people getting hospital appointments. There has also been an increase in the number of patients covered by the practice, we are now at approx. 6400 patients.

Q – Whilst it is great to have the additional support for the Paramedic Practitioner, Physician Associate, Clinical Pharmacist etc., does this not put an additional strain on the GPs who may have to be consulted?

A – Yes, there is still some impact on the GPs but the time freed up is beneficial.

Fundraising

Background:

John Cripps' wife was required to undergo 24-hour blood pressure monitoring but due to a lack of equipment within the surgery she still, 4 months on, has not be able to access the equipment to get the test completed.

John has asked the PPG whether it would be possible to fund-raise for additional equipment.

Surgery information:

The surgery only has two 24-hour BP monitoring devices at present and therefore can only support the gathering of 4 patient data sets per week (each patient wears the device for 24 hours before it is returned and cleaned and made ready for the next patient.)

The surgery, though funded by the NHS, is classed as a Private Business and is therefore responsible for allocating the funds as they see fit. The funding from the NHS does not cover all the needs of the surgery. Some PPGs have done fundraising in order to buy additional equipment for their respective surgeries.

The cost of a 24-hour BP monitor is about £1195.

Q – What is the mechanism for doing this?

A - Money can be raised and then given to the surgery to ring-fence for a particular purpose e.g. 24-hour blood pressure equipment. We could also have a donation register set up to be able to track where the money has been spent.

Q – Could the equipment be purchased by the PPG and then given to the surgery?

A – Yes this is a good way of doing this, but the equipment must be compatible with the surgery's existing IT systems.



	<p>Q - Do the PPG members present at this meeting think that this is a good idea? A - YES – via on-line crowd-funding systems and ensuring that GiftAid is used to benefit the surgery by 25%</p> <p>Q – Does the surgery have a list of equipment that they feel is needed for the benefit of the patients and is of high priority? A – Yes</p> <p>ACTION – Pete to supply the list of high priority equipment for circulation to the PPG</p> <p>Q – If the surgery was to have additional monitoring devices would they be able to cope with the additional data downloads and equipment preparation? A - Yes</p> <p>ACTION – John will investigate the use of on-line funding systems and share the information.</p>
<p>Any Other Business</p>	<p>Q - Can we volunteer to help the surgery. A - The ICB (Integrated Care Board) are looking into ways for people to volunteer.</p>
<p>Annual General Meeting</p>	<ul style="list-style-type: none"> • The AGM will be held on 12th July 2023 starting at 7pm. • Suggestions for presentations: Day in the Life of a Surgery Receptionist Update from Kent Community Trust Mental Health Nurse- with hints and tip on how to have strong mental health, where to go to for help etc.
<p>Next, and Subsequent Meetings</p>	<ul style="list-style-type: none"> • Next quarterly meeting: 19 April 2023 *PLEASE NOTE THAT THIS DATE HAS CHANGED (originally 12th April) • Subsequent quarterly meeting: 06 Sep 2023